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AND
CHANGE OF CORRESPONDENCE ADDRESS**

Application Number	10667317
Filing Date	0923/2003
First Named Inventor	JERRY RAYBORN
Art Unit	
Examiner Name	PHILLIP TUCKER
Attorney Docket Number	PA-00520

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.

OR

☒ I hereby appoint the practitioners associated with the Customer Number: 26721

☒ Please change the correspondence address for the above-identified application to:

☒ The address associated with
Customer Number:

26721

OR

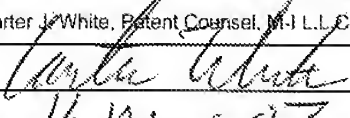
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I am the:

☐ Applicant/Inventor.

☒ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Name	Carter J. White, Patent Counsel, M-I L.L.C.		
Signature			
Date	16 May 07	Telephone	281 561 1450

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ *Total of 1 forms are submitted.

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